			PART B	// <u>)</u> - FEE(S) TR	7/05 Ansmittal			ja-
,	Complete and send the	his form, together wit	h applicable fe	ee(s), to: <u>Mail</u>	Commissioner f P.O. Box 1450	or Patent		#/
ن.	JAN 2 6 2005			or <u>Fax</u>	Alexandria, Virginia 22313-1450 <u>ax</u> (703) 746-4000			
Ī ā i	NSTRUCTIONS: This far appropriate. All further conditions are represented to the condition of the condition	by should be used for trans- respondence including the below or directed otherwise as.	smitting the ISSU Patent, advance ord in Block 1, by (a)			uired). Block will be mail s; and/or (b)	ts 1 through 5 sled to the current indicating a sepa	hould be completed where correspondence address as trate "FEE ADDRESS" for
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٢	APPLICATION NO.	FILING DATE	I	FIRST NAMED INV	/ENTOR	ATTORNE	Y DOCKET NO.	CONFIRMATION NO.
Ī	10/600,400	05/20/2003		Richard P. Oue	lette 7784-612			7005
7	FITLE OF INVENTION: R	UNWAY-INDEPENDENT	OMNI-ROLE MO	ODULARITY EN	HANCEMENT (ROME)	VEHICLE		
ſ	APPLN. TYPE	SMALL ENTITY	ISSUE FE	EE	PUBLICATION FEE	TOTAL	FEE(S) DUE	DATE DUE
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٢	EXAMINER		ART UNIT		CLASS-SUBCLAS S	7		
, L	COLLINS, TIMOTHY D		3643		244-120000	_		•
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;	3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
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